

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CREDO SUPERPAC		FEC IDENTIFICATION NUMBER ▼ C C00507517	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY 08 / 16 / 2012	

Full Name (Last, First, Middle Initial) of Payee Credo Mobile		Date MM / DD / YYYY 08 / 02 / 2012	
Mailing Address 101 Market Street Suite 700		Amount 656.53	
City San Francisco	State CA	Zip Code 94105	Transaction ID : SE.7297
Purpose of Expenditure Phones	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4701.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Michael Eagle		Date MM / DD / YYYY 08 / 01 / 2012	
Mailing Address 22 Clover Lane		Amount 1062.50	
City Wayne	State PA	Zip Code 19087	Transaction ID : SE.7106
Purpose of Expenditure Payroll	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4821.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1719.03
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Becky Bond

[Electronically Filed]

Date

MM / DD / YYYY
09 / 17 / 2012

Signature